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| CLAIMS ONLY | | | | | | | Application Number 09830954 | | Filing Date | | |
|--------------|----------|--------|-----------------------|--------|------------------------|--------|---|-------|-------------|-------|--------|
| | | | | | | | Applicant(s) | | | | |
| | | | | | | | * May be used for additional claims or amendments | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | | Indep | Depend | Indep | Depend |
| 1 | | | | | | | 51 | | | | |
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| Total Indep | 3 | | 1 | | | | Total Indep | | | | |
| Total Depend | 43 | | 23 | | | | Total Depend | | | | |
| Total Claims | 46 | | 24 | | | | Total Claims | | | | |

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| CLAIMS ONLY | | | | | | | Application Number 09/830,954 | | Filing Date | | |
|--------------------|----------|--------|-----------------------|--------|------------------------|--------|---|--|-------------|--|--|
| | | | | | | | Applicant(s) | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | * May be used for additional claims or amendments | | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | * | | * | | |
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| Total Indep | | | | | | | Total Indep | | | | |
| Total Depend | | | | | | | Total Depend | | | | |
| Total Claims | | | | | | | Total Claims | | | | |